PAGE 1 / 14

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An At	dinorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Now or Never PAC			
ADDRESS (number and street)	7509 NW Tiffany Springs	Pkwy	
▼ Check if different	Suite 300		
than previously reported. (ACC)	Kansas City		MO 64153
2. FEC IDENTIFICATION N	UMBER ▼ C	CITY A	STATE ▲ ZIP CODE ▲
C C00513432	3.	IS THIS REPORT X (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	eb 20 (M2) May 20	(Non-Election Year Only)
(a) Quarterly Reports:		ar 20 (M3) Jun 20	(Non-Election Year Only)
April 15 Quarterly Report (0		pr 20 (M4) Jul 20 (l	M7) x Oct 20 (M10) Jan 31 (YE)
July 15	PRF-Flection	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (C	Floo	tion on	in the
Year-End Report (\) July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report	Report for the:	M = M / D = D	/ Y Y Y in the
(TER)	Elec	tion on	in the State of
5. Covering Period 09			09 30 / 2016
I certify that I have examined the Type or Print Name of Treasure	Thomas III, James, C, ,	of my knowledge and belief it	is true, correct and complete.
Signature of Treasurer	nas III, James, C, ,	[Electronically Filed]	Date 10 / 12 / 2016
NOTE: Submission of false, error	neous, or incomplete informat	ion may subject the person sigr	ning this Report to the penalties of 52 U.S.C. § 3010
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Now or Never PAC 09 01 2016 09 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 475.94 January 1, 2016 (b) Cash on Hand at 275.94 Beginning of Reporting Period..... 3629.00 3629.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 4104.94 3904.94 6(a) and 6(c) for Column B)..... 3356.74 3556.74 7. Total Disbursements (from Line 31)..... 8. Cash on Hand at Close of Reporting Period 548.20 548.20 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1320.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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ľ	M()W	()	INEVEL	PA	ι.

Report Covering the Period: From: 09	01 2016 To	09 30 2016		
I. Receipts	I. Receipts COLUMN A Total This Period			
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00		
(i) itemized (dee conedate / i)	4			
(ii) Unitemized	0.00	0.00		
(iii) TOTAL (add	0.00	0.00		
Lines 11(a)(i) and (ii)	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees				
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	0.00	0.00		
Totals to Line 33, page 5) Transfers From Affiliated/Other	3.00			
Party Committees	0.00	0.00		
F	4			
. All Loans Received	0.00	0.00		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures	7			
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	3629.00	3629.00		
. Refunds of Contributions Made	4 4	4 4		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts (Dividends Interest etc.)	0.00	0.00		
(Dividends, Interest, etc.)	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
=	7 7 7			
(b) Levin Funds (from Schedule H5)	0.00	0.00		
=				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d),	0.00	0.		
12, 13, 14, 15, 16, 17, and 18(c))	3629.00	3629.00		
,, ., ., ., ., .,,	3020100	7 7 7		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	3629.00	3629.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal	ederal		Carrinal 1941 to Butto
Activity (from Schedule I (i) Federal Share	' I	0.00	0.00
(i) I caciai chaic		4	
(ii) Non-Federal Share.		0.00	0.00
(b) Other Federal Operating		2250.74	2550.74
Expenditures(c) Total Operating Expendit		3356.74	3556.74
(add 21(a)(i), (a)(ii), and		3356.74	3556.74
. Transfers to Affiliated/Other F		4 4 4	
Committees Contributions to		0.00	0.00
Federal Candidates/Committe	ees	0.00	0.00
and Other Political Committee Independent Expenditures	es	0.00	0.00
(use Schedule E)		0.00	0.00
Coordinated Party Expenditure (52 U.S.C. § 30116(d))	res	4	4 4 4
(use Schedule F)	L	0.00	0.00
Loan Ponaymente Made		0.00	
Loan Repayments Made		0.00	0.00
Loans Made		0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	er	4 4	
Than Political Committee	es	0.00	0.00
(b) Dalitical Davis Committee	. —		
(b) Political Party Committee(c) Other Political Committee		0.00	0.00
(such as PACs)		0.00	0.00
(d) Total Contribution Refun		, , ,	-99
(add Lines 28(a), (b), ar		0.00	0.00
	,	4 4	4 4
Other Disbursements (Includi			
Non-Federal Donations)		0.00	0.00
Federal Election Activity (52	U.S.C. § 30101(20))		
(a) Allocated Federal Election	on Activity		
(from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity		0.00	0.00
Entirely With Federal Fu		0.00	0.00
(c) Total Federal Election Ad		7 7 7	
Lines 30(a)(i), 30(a)(ii) a	nd 30(b))	0.00	0.00
Total Disbursements (add Lir	nes 21(c), 22.		
23, 24, 25, 26, 27, 28(d), 29		3356.74	3556.74
		5550.74	3330.14
Total Federal Disbursements	: OO(-)(")		
(subtract Line 21(a)(ii) and Li			
from Line 31)	·······	3356.74	3556.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 0.00 0.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 0.00 0.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 3356.74 3556.74 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 3629.00 3629.00 (from Line 15, page 3)..... 38. Net Operating Expenditures -272.26 -72.26 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 14 (check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17						
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) Now or Never PAC									
Full Name of Individual (Last, First, Midd A. Del Cielo Media, LLC	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1427 Leslie Ave Suite 100									
City Alexandria	State VA	Zip Code 22301	Transaction ID : SA15.4771 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		3629.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item Media Refund from 2014 Election Cycle						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3629.00	I Would Notate Home 2014 Election Syste						
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address	Mailing Address								
City	State	Zip Code	Amount of Fools Possint this Povint						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼							
Full Name of Individual (Last, First, Midd	le Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address			M = M / D = D / Y = Y = Y						
City	State	Zip Code	Amount of Each Descint this Period						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼							
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line number 1)			3629.00 3629.00						

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SA15 Transaction ID: SA15.4771

A check was received from Del Cielo Media, LLC. The committee was informed that this check was for a refund for unplaced media from the 2014 election cycle.

Form/Schedule: Transaction ID:

ľ

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE				
ITEMIZED DISBURSEMENTS	O DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page (check of X 21 28					
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	nents may not be sold or une and address of any polit	sed by any perso	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Now or Never PAC						
Full Name (Last, First, Middle Initial)			Data of Dishuranean			
A. Law office of James Thomas III			Date of Disbursement			
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300			09 08 2016			
,	State Zip Code		FEC Identification Number			
Kansas City	MO 64153					
Purpose of Disbursement Legal and Reporting Services November 2015		001	C C00513432			
Candidate Name			Transaction ID : SB21B.4760			
Now or Never PAC		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For: 2016 Primary x General	71.	400.00			
President State: District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. Law office of James Thomas III			Date of Disbursement			
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300			09 08 2016			
Kansas City	State Zip Code MO 64153		FEC Identification Number			
Purpose of Disbursement Legal and Reporting Services December 2015	Purpose of Disbursement Legal and Reporting Services December 2015 001					
Candidate Name		Category/	Transaction ID : SB21B.4761 Amount of Each Disbursement this Period			
Now or Never PAC		Type	Amount of Each Disbursement this Feriod			
	nent For: 2016		400.00			
	Primary General Other (specify)		Memo Item			
State: District:			I METHO ITEM			
Full Name (Last, First, Middle Initial) C. Law office of James Thomas III			Date of Disbursement			
Mailing Address 7509 NW Tiffany Springs Pkwy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Ssuite 300			2010			
	State Zip Code		FEC Identification Number			
Kansas City	MO 64153					
Purpose of Disbursement Legal and Reporting Services		001	C C00513432 Transaction ID : SB21B.4763			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Now or Never PAC		Туре	726.74			
Senate	nent For: 2016 Primary		726.74			
State: District:	Other (specify) ▼		Memo Item			
State.						
SUBTOTAL of Disbursements This Page (optional)		·····•	1526.74			
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)	Use senara	separate schedule(s) FOR LINE NUMBER: PAGE (check only one)			PAGE 9 OF 14
ITEMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page	(check only 21b 28a	26 27 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)	o una addres	oo or arry politica	. 5511111111111111111111111111111111111	CONOR CONTRIBUTIONS	
Now or Never PAC					
Full Name (Last, First, Middle Initial)				Data of Dill	
A. Law office of James Thomas III				Date of Disburser	
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300				09 08	
City		Zip Code		FEC Identification	Number
Kansas City Purpose of Disbursement	МО	64153		00054040	
Legal and Reporting Services			001	C C0051343	
Candidate Name			Category/		ID: SB21B.4764 Disbursement this Period
Now or Never PAC			Type		
	ment For: 20				480.00
Senate President	Primary Other (specif	General x General		п.,	
State: District:	Janor (Specif	J) ▼		Memo Item	
Full Name (Last, First, Middle Initial)					
B. Law office of James Thomas III				Date of Disburser	
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300		09 08	2016		
City Kansas City	State MO	Zip Code 64153		FEC Identification	Number
Purpose of Disbursement Legal and Reporting Services		04100	001	C C0051343	2
Candidate Name					D : SB21B.4765
Now or Never PAC			Category/ Type	Amount of Each L	Disbursement this Period
Office Sought: House Disburse	ment For: 20	016			480.00
Senate	Primary	✗ General			
State: President State:	Other (specif	у)		Memo Item	
Full Name (Last, First, Middle Initial)					
C. Law office of James Thomas III				Date of Disburser	
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300				M M / D 08	
City	State	Zip Code		FEC Identification	Number
Kansas City	МО	64153			INGITIO
Purpose of Disbursement Legal and Reporting Services	001	C C0051343	2 ID : SB21B.4766		
Candidate Name	<u> </u>		Category/		Disbursement this Period
Now or Never PAC Office Sought: House Disburse	ment For: 20	16	Туре		390.00
Senate	Primary	General			330.00
President	Other (specif			Memo Item	
State: District:				iviemo item	
SUBTOTAL of Disbursements This Page (optional).				45	1350.00
			<u> </u>		
TOTAL This Period (last page this line number only	')				

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SCHEDULE B (FEC Form 3X)	l le -	under nicht auf 1. (.)					10 O	F 14			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check				, –	٦	_	7.67	
		Summary Page		21b 28a	22 28b	23		26 29		27 30b	
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)		,									
Now or Never PAC											
/ 1161/ 61 116761 1 716											
Full Name (Last, First, Middle Initial)											
Thomas III, James, C, ,					Date of Disbursement						
Mailing Address 7509 NW Tiffany Springs Pkwy					M = M 09	/	08	1 /		016	Y
Suite 300					03	-	00			010	_
						ntifica	tion N	Numbe	or.		
Tunious City					T LO Ide		LIOIT	Vuilibe	71	-	
Purpose of Disbursement Legal and Reporting Services			004	71	C	C0051	3432			.	
Candidate Name			001	_				: SB2			
Now or Never PAC			Category Type	'/	Amount	of Ea	ch Di	sburse	ement	t this P	eriod
	nent For: 2		Туро		L					480.00)
	Primary	x General				7		7			
President	Other (spec	cify) 🔻			Mer	mo Ite	m				
State: District:					ш						
Full Name (Last, First, Middle Initial)						5					
3.					Date of	_		∍nt — —			
Mailing Address				M M / D D / Y Y Y Y				Y			
Mailing / Address								1 1	_		_
City	State	Zip Code			FEC Ide	entifica	tion N	Jumbe	er		
Durana of Dishuranant								Tallibo		-	
Purpose of Disbursement				7	C						
Candidate Name			0-1		A	-4	-h D:			C	ام ما د
			Category Type	"	Amount of Each Disbursement this Period				eriod		
Office Sought: House Disbursem	nent For:		71			_					
	Primary	General									
	Other (spec	cify)			Mer	mo Ite	m				
State: District:											
Full Name (Last, First, Middle Initial) C.					Date of	Diehu	ıreamı	≏nt			
0.					M M	_	D D	_	V V	Y	V
Mailing Address					W = W		_		-		'
City	State	Zip Code			FEC Ide	entifica	tion N	Numbe	er:		
Purpose of Disbursement		1		_					_	\neg	
Candidate Name Category/				71	C						
				,,	Amount	of Ea	ch Di	sburse	emen	t this P	eriod
			Type	´		_	-		_	-	
Office Sought: House Disbursem						-			_	1 45	
	Primary	General									
State: District:	Other (spec	city) 🔻			Mer	mo Ite	m				
State. District.											
SUBTOTAL of Disbursements This Page (optional)										480.0	0
TOTAL S. Sissurosimonio Tino Lago (optional)					#	-	=		=		#
TOTAL This Period (last page this line number only).				•						3356.7	4

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

	9
x	10

14

NAME OF COMMITTEE (In Full) Now or Never PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal and reporting services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City MO 64153 Transaction ID: SD10.4732 Outstanding Balance Beginning This Period 400.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 400.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal and Reporting Services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City 64153 Outstanding Balance Beginning This Period Transaction ID: SD10.4735 400.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 400.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal & Reporting Services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City MO 64153 Outstanding Balance Beginning This Period Transaction ID: SD10.4741 726.74 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 726.74 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 12 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

Name of committee (In Full) Now or Never PAC				
A. Full Name (Last, First, Middle Initial) of Debtor Law office of James Thomas III	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Law office of James Thomas III			
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300			_	
City	State Zip Code			
	Kansas City MO 64153			
Outstanding Balance Beginning This Period			Transaction ID : SD10.4745	
480.00				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00		480.00	0.00	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):	
Law office of James Thomas III			Legal & Reporting Services	
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300	7005 TVV Tiliarly Opinings I Kwy			
City	State	Zip Code 64153		
Kansas City	MO	04153		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4748	
480.00				
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00		480.00	0.00	
C. Full Name (Last, First, Middle Initial) of Debtor Law office of James Thomas III	or Creditor		Nature of Debt (Purpose): Legal & Reporting Services	
Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300			-	
City Kansas City	State MO	Zip Code 64153		
,	IVIO	04100		
Outstanding Balance Beginning This Period 390.00			Transaction ID: SD10.4749	
Amount Incurred This Period	Outstanding Balance at Close of This Period			
0.00		390.00	0.00	
			0.00	
1) SUBTOTALS This Period This Page (optional)		>	0.00	
2) TOTALS This Period (last page this line number of	2) TOTALS This Period (last page this line number only)			
3) TOTAL OUTSTANDING LOANS from Schedule C	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
4) ADD 2) and 3) and carry forward to appropriate li	ine of Summa	ry Page (last page only) ▶		

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

14

NAME OF COMMITTEE (In Full) Now or Never PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal and Reporting Services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City MO 64153 Transaction ID: SD10.4753 Outstanding Balance Beginning This Period 480.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 480.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal and Reporting Services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City 64153 Outstanding Balance Beginning This Period Transaction ID: SD10.4755 450.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 450.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal and Reporting Services Law office of James Thomas III Mailing Address 7509 NW Tiffany Springs Pkwy Ssuite 300 City State Zip Code Kansas City MO 64153 Outstanding Balance Beginning This Period Transaction ID: SD10.4767 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 390.00 390.00 1320.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 14 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) Now or Never PAC			
A. Full Name (Last, First, Middle Initial) of Debtor Thomas III, James, C, ,	Nature of Debt (Purpose): Legal and reporting services		
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	
Outstanding Balance Beginning This Period			Transaction ID : SD10.4738
480.00			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
0.00		480.00	0.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period	-	ment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)		>	0.00
2) TOTALS This Period (last page this line number of	only)	>	1320.00
3) TOTAL OUTSTANDING LOANS from Schedule C	0.00		
4) ADD 2) and 3) and carry forward to appropriate li	1320.00		